

I just want to remind my colleagues and the American people that there is no one more qualified or more trusted to do this job than Robert Mueller. He spent almost his entire adult life in service to his country. He is a decorated veteran of the Vietnam war and served as U.S. attorney for 12 years. He was appointed by a Republican President, President George Bush, to lead the FBI in 2001 and served his full 10-year term with distinction, and then he was asked to spend an additional 2 years under President Obama. Congress had to pass a special waiver to allow him to continue in his FBI post, and the vote was unanimous. Every Republican—many in this Chamber—voted unanimously to ratify Robert Mueller for another 2 years as FBI Director. What an endorsement—a great endorsement. That vote made Mr. Mueller the longest serving FBI Director since J. Edgar Hoover and the only FBI Director to serve under Presidents of both parties.

Mr. Mueller represents the best of public service. He will pursue this investigation without regard to politics or pressure of any kind, and that is exactly what America needs.

The chorus of extreme commentators and media personalities who seek to curry favor with the President by trying to tear down this man of great integrity is only heaping dishonor on themselves. Worse yet, they are trying to discredit our most important democratic institution—the rule of law. These critics know Mr. Mueller is a straight arrow, and many of them said as much when he was appointed, but because he is in a position to examine the President's actions and perhaps to take action, they are attacking his character.

This is not, my colleagues, a political game. This is a very serious investigation about foreign interference in our elections—something that eats at, that corrodes the roots of our democracy, the very wellspring of our being and pride as a nation.

The man leading this investigation ought to be trusted by the American people, and over the course of his long, distinguished career, he has certainly earned that trust.

Again, I urge that these attacks on Mr. Mueller cease and that my friends on the other side of the aisle join me in defending his reputation. The critics are going much too far.

I yield the floor and ask that the Senator wait 1 minute so that I might have a word with him.

The PRESIDING OFFICER. The Senator from Indiana.

HEALTHCARE LEGISLATION

Mr. DONNELLY. Madam President, over the last several months, there has been an important debate about healthcare—a debate between those who believe we can strengthen the American healthcare system by improving the Affordable Care Act and

those who believe the law must be repealed and replaced. If you listen closely, however, the question at the heart of both sides of this debate sound oddly the same—how do we make sure Americans have access to quality healthcare they can afford? It is this shared concern about the affordability of quality healthcare and the recent actions of the Trump administration that I would like to discuss today.

For a moment, let's set aside the healthcare reform debate because whether we agree to work together in a bipartisan way to improve our healthcare system, as I strongly believe we should, or whether Republicans push through a partisan proposal to significantly change the way in which Americans receive healthcare, we should all be able to agree that we want to protect the stability of the insurance markets and access to quality, affordable healthcare. Yet, despite this shared objective, protecting the stability of our healthcare system has not been the approach of this administration. Instead, it has done the opposite. It has tried to drive change by creating instability and chaos.

On his first day in office, the President did not ask how he could fix the Affordable Care Act or improve the healthcare system. Instead, he began a deliberate, strategic effort to undermine the healthcare system, to drive up costs, and to create a scenario so painful for regular folks that we would have no choice but to rebuild the healthcare system from scratch.

On the day he was sworn in, President Trump signed an Executive order to exempt, to delay, and to defer the implementation and enforcement of the law, creating instability in the marketplaces where millions of Americans obtained the coverage they needed. The administration canceled enrollment efforts to attract younger and healthier Americans into the insurance markets. This resulted in an estimated 500,000 fewer Americans purchasing coverage. Most notably, the administration has refused to commit to continuing critical payments that lower deductibles and copays for our families. This drives up the costs for our friends and neighbors, and in some States, it drives insurance companies out of the market completely.

To be fair, though, the President has been straightforward about his strategy to undermine the Affordable Care Act, noting that the best thing we can do “is to let ObamaCare explode. Let it be a disaster because we can blame that on the Democrats.”

For the President and many in Washington, healthcare seems to be a political exercise. I can assure you that for the citizens of my State back home in Terre Haute, in Richmond, in Fort Wayne, in Indianapolis, in Lawrenceburg, and in Evansville—particularly for those with preexisting conditions, including children, older Hoosiers, and people with disabilities—this is about a lot more. It is about the health and the

well-being of our loved ones. It is about the financial security of our families. For many, it is a life-and-death issue.

This week, Indiana's insurance companies will submit their proposed healthcare rates for 2018 to the Indiana Department of Insurance. It is the first step in a routine process that determines how much Hoosiers will be paid for critical healthcare coverage in the coming year. The 2018 filings, however, are likely to be anything but routine. Growing evidence across the country shows that the actions taken by the President and the administration, along with legislative uncertainty in Congress, have created instability and have created chaos in the insurance markets, resulting in significant cost increases for consumers.

Let me share just a few examples of what I am hearing from the insurance companies in my home State of Indiana. The president and CEO of CareSource, an insurer that offers plans to Hoosiers through the insurance marketplace, told me that at the beginning of this year, the company was seeing rates stabilize, and if there was certainty regarding cost-sharing payments—those payments I previously discussed—rates would increase by about 2 percent—2 percent—in 2018 compared to 2017.

Now, though, the company is saying that, if the administration stops cost-sharing payments—and they have refused to commit to making those payments—rates for silver plans would increase by a minimum of 15 percent.

This is real money, real families, real healthcare, and real life-and-death decisions.

The president and CEO said: “In addition, we believe that ceasing CSR payments may adversely impact the risk pools, potentially leading to further increases in future years.”

The chairman and CEO of Indianapolis-based Anthem said, in part, in a letter:

As I have stated publicly over the previous few months, without certainty of CSR funding . . . Anthem will have no choice but to reevaluate our approach to filing 2018 rates.

Such adjustments could include reducing service area participation, requesting additional rate increases, eliminating certain product offerings, and/or exiting certain individual ACA-compliant markets altogether.

Let me be clear. These cost increases, limits on product offerings, and market exits are not the result of the current law or even the healthcare system. This is a deliberate choice. They are the result of a deliberate choice by the President to undermine the healthcare law at the expense of real people—moms, dads, sisters, brothers, sons, and daughters.

This makes no sense. If your house needs repairs, you don't set the house on fire. You work to fix the issues.

If we are serious about improving healthcare in this country, we can do it, and we can do it by working together. In my home State of Indiana, I was proud to work with then-Indiana Governor and now Vice President MIKE

PENCE when he used ObamaCare to establish a program we call the Healthy Indiana Plan, or HIP, 2.0. The innovative plan expanded healthcare coverage to over 200,000 Hoosiers, and it helped to reduce the uninsured rate in Indiana by 30 percent—30 percent.

Our Vice President called this program a “national model” to provide affordable healthcare to our most vulnerable citizens and treatment to those struggling with opioid abuse and heroin use, which is an absolute scourge on our country.

We can improve our healthcare system by working together, but the first step is to do no harm—to stop doing damage to the current system and to the people who rely on it.

Healthcare is not a game. It is life and death. This is about people's health. It is about economic security. It is about real lives.

I hope my Republican colleagues and the administration will immediately stop these efforts to damage our healthcare system and will work with all of us on our shared goal to make quality healthcare more affordable. There is way too much at stake for Hoosiers and for all the people in our beloved country.

I yield the floor.

I suggest the absence of a quorum.

The PRESIDING OFFICER. The clerk will call the roll.

The senior assistant legislative clerk proceeded to call the roll.

Mr. MCCONNELL. Madam President, I ask unanimous consent that the order for the quorum call be rescinded.

The PRESIDING OFFICER. Without objection, it is so ordered.

EXECUTIVE SESSION

EXECUTIVE CALENDAR

Mr. MCCONNELL. Madam President, I move to proceed to executive session to consider Calendar No. 115.

The PRESIDING OFFICER. The question is on agreeing to the motion. The motion was agreed to.

The PRESIDING OFFICER. The clerk will report the nomination.

The senior assistant legislative clerk read the nomination of Kristine L. Svinicki, of Virginia, to be a Member of the Nuclear Regulatory Commission for the term of five years expiring June 30, 2022.

CLOTURE MOTION

Mr. MCCONNELL. Madam President, I send a cloture motion to the desk.

The PRESIDING OFFICER. The cloture motion having been presented under rule XXII, the Chair directs the clerk to read the motion.

The senior assistant legislative clerk read as follows:

CLOTURE MOTION

We, the undersigned Senators, in accordance with the provisions of rule XXII of the Standing Rules of the Senate, do hereby move to bring to a close debate on the nomination of Kristine L. Svinicki, of Virginia, to

be a Member of the Nuclear Regulatory Commission for the term of five years expiring June 30, 2022.

Mitch McConnell, Orrin G. Hatch, John Hoeven, John Cornyn, John Barrasso, John Boozman, Mike Rounds, Thom Tillis, Chuck Grassley, John Thune, Mike Crapo, Bill Cassidy, James M. Inhofe, Thad Cochran, Steve Daines, Tom Cotton, Roger F. Wicker.

Mr. MCCONNELL. Madam President, I ask unanimous consent that the mandatory quorum call be waived.

The PRESIDING OFFICER. Without objection, it is so ordered.

LEGISLATIVE SESSION

MORNING BUSINESS

Mr. MCCONNELL. Madam President, I ask unanimous consent to resume morning business as under the previous order.

The PRESIDING OFFICER. Without objection, it is so ordered.

The Senator from Oregon.

HEALTHCARE LEGISLATION

Mr. WYDEN. Madam President, the American people have spent the last several weeks hearing that the Senate will vote on its new version of TrumpCare by the end of the month. It is now June 19, and the American people are still in the dark about this bill. There is no text. There is no legislative analysis of this bill and no scoring of what the financial ramifications are. The American people—and much of this Senate—are in the dark. We are in the dark about how much costs are going to rise, in the dark about how many people are going to lose insurance, and in the dark about whether a preexisting condition will once again be used as a weapon against them by insurance companies.

If news reports are to be believed—and that is all we have right now—a vote on this massive proposal affecting the lives of virtually all our people is days away. No one outside of a group of 13 men—all Republicans—knows what is being considered. In my view, this is as stark an example of legislative malpractice as I can remember.

It is time for Americans to get loud, to do their part, and to make sure their voices are heard on an issue that is so personal and so vital to our people and their families.

If and when this bill hits the floor, the debate is going to go by very quickly. By the standards of the Senate, it will be over in a flash. So this afternoon, I want to be direct with a few key points for those across this country to remember over the next two weeks.

First, the Republican healthcare plan is going to raise costs for the typical American. If you are an older person nearing retirement—55, 58, 61—you are going to get hammered with an age tax. You are going to be forced to pay several times as much as a younger person for health insurance.

Under the House TrumpCare bill, 64-year-old seniors of modest means are going to see their premiums shoot up by 800 percent. I would like to hear somebody try to explain to a lifelong trucker or to someone who has spent decades cleaning offices to put food on their family's table why that is an improvement in American healthcare.

These are older people who already struggle to make ends meet, and they have been told for the last 7 years that repealing and replacing the Affordable Care Act is going to lower their healthcare costs. Now they face the reality of TrumpCare, which says that they will somehow have to spend the bulk of their income on health insurance and, in some cases, it will take up nearly all of it.

It is not just older people who face this age tax that will see their costs rise. TrumpCare cuts middle-class tax benefits for healthcare that were put in place under the Affordable Care Act, particularly in rural areas. That means premiums are going to be a much bigger burden on typical middle-class families.

The Republican healthcare plan ends the air-tight, loophole-free guarantee that protects Americans from being discriminated against for a preexisting condition. Working adults—30, 40, 50 years old—who thought they were home free with employer-sponsored insurance, under this bill could, once again, face some of the worst insurance company abuses, including annual and lifetime limits on benefits.

One new report says 27 million Americans could get hit by annual limits and 20 million could face lifetime limits.

Here is what this means: A 35-year-old, for example, who develops cancer could bust that cap in a hurry. If you have to go through expensive surgeries and chemotherapy, busting those caps could mean facing decades—decades—digging out from medical debt.

Second, TrumpCare is built around the \$800 billion attack on Medicaid. Today, Medicaid comes with a guarantee: If you walk an economic tightrope, are sick or injured, you will get the care you need. You can't be denied benefits, but slashing the program by hundreds of billions of dollars ends that guarantee because States are going to have to cut benefits. The best way to understand the consequences of that plan is to look at seniors who need nursing home care.

The Medicaid nursing home benefit helps pick up the tab for two out of three nursing home beds in America because, the fact is, growing old in America gets expensive. You can do everything right through a lifetime of hard work, scrimping and saving, putting off vacations or big purchases to be financially prudent, but still, a lot of people go through their savings. That is when Medicaid steps in for seniors to help cover the cost of nursing homes and other long-term care. One year in a nursing home now costs more